

A Framing Strategy to Guide Campaign Development on Infant Mental Health

Developed by the FrameWorks Institute in partnership with
Connecticut Association for Infant Mental Health

Campaign Frame Brief

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Contents

Introduction2

Campaign Goal & Objectives 3

Core Concepts We Want to Communicate 5

The Cultural Landscape We Need to Navigate7

An Evidence-Based Framing Strategy: 5 Principles10

Conclusion 21

Relevant Resources 22

About FrameWorks..... 23

Introduction

In setting out to develop a campaign, we might like to think we have a blank slate. However, no campaign ever exists in a vacuum—it must engage with the broader public discourse too. Herein lies a powerful opportunity for social change.

Developing a campaign involves creating tailored messages for target audiences to be disseminated across key platforms and through select channels. In this way, campaigns are quite narrowly focused and specific. At the same time, campaigns are inevitably shaped by—and, in turn, have the potential to shape—broader cultural narratives. By aligning campaign communications around a framing strategy, like the one offered in this brief, advocates can make the most of this social change opportunity. We can shift public thinking and discourse away from the dominant narrative that is holding us back, and help advance a more forward-looking one. *The narrative shift to which our infant mental health (IMH) campaign contributes is outlined in the diagram below.*

The Dominant Cultural Narrative on IMH

Mental health is a “grown-up” concept—it doesn’t apply to infants. What babies need, above and beyond all else, is unconditional love and devoted attention from the adults who care for them. Ultimately, parents are responsible for ensuring their children do well.



A Forward-Looking Narrative on IMH

Building the skills to manage our emotions, form healthy relationships, and meaningfully engage with the world is a lifelong journey—and it starts on day one. Social supports make it easier to maintain positive mental health, while social barriers can make it very hard.

Campaign Goal & Objectives

Every successful campaign is organized around an overarching goal supported by a set of clear objectives. Together, they provide direction throughout campaign development and serve as a north star.

The goal of our campaign is *to increase statewide awareness, understanding, and action in support of infant mental health and its multi-skilled workforce*. This goal will ground our shared thinking and focus our efforts throughout the campaign development process, providing clear direction and guiding associated decision-making along the way. Building on the themes of awareness, understanding, and action, our campaign goal is supported by the three objectives described below.

OBJECTIVE #1

Expand structural awareness and issue-relevant identity

We aim to make infant mental health a social issue that all Connecticut residents care about and see themselves in. Likewise, we aim to help IECMH¹ professionals and practitioners, as well as families with infants, appreciate that they belong to—and each play a valuable part in—a wider caregiving ecosystem.

¹ Note: While the priority for this campaign is to increase visibility around infant mental health specifically, we recognize that the relevant workforce includes both infant mental health professionals and also early childhood mental health professionals, all of whom we intend to include here. As such, we use the phrase “infant mental health” (or the corresponding acronym, IMH) in some cases, and the phrase “infant and early childhood mental health” (or the corresponding acronym, IECMH) in others, as deemed appropriate.

OBJECTIVE #2**Build understanding of infancy as the foundation of mental health**

We aim to build greater public understanding about the fact that—across our lifespans, including throughout the entirety of our adulthoods—core aspects of our mental health can be traced back to the influences we were exposed to, the network of people who touched our lives, and the experiences we had during infancy.

OBJECTIVE #3**Mobilize action to strengthen practical competency**

We aim to mobilize collective actions at the sector, community, and statewide levels that will strengthen the practical competency of the IECMH workforce and shore up the supportive infrastructure of the field. Relevant actions will increase education and training programs, expand professional development opportunities, and secure better working conditions and compensation for practitioners through procedural or policy change.

Campaign Goal & Objectives: *At-a-Glance*

Goal: To increase statewide awareness, understanding, and action in support of infant mental health and its multi-skilled workforce



Objective #1: Expand structural awareness and issue-relevant identity

Objective #2: Build understanding of infancy as the foundation of mental health

Objective #3: Mobilize action to strengthen practical competency

Core Concepts We Want to Communicate

Framing involves a set of choices about the packaging and presentation of information—where to start, when to elaborate, and even which parts to leave unsaid. But before considering how to deliver a message, we must first decide what we want to say.

The following concepts comprise the most pertinent pieces of information to be communicated through an infant mental health campaign. Unlike talking points, taglines, or ready-made messages, they represent core content and underlying ideas—without the packaging (but don't worry, we'll get to that!). While it's certainly not the case that every concept in the list below will be contained within every communication, all six concepts will be variously featured across multiple communications and therefore reiterated throughout the campaign.

The core concepts that our campaign aims to communicate about infant mental health include the following:

- **Early influences (occurring between age 0-6) have an outsized impact on mental health, and they carry significant implications across the lifespan.** As such, positive influences and supports are critically needed starting on day one. The sooner they are introduced, the more efficient and effective they are likely to be.
- **Infant mental health is relational.** Stimulating interactions and meaningful connections between infants and adults form the basis for infant mental health. Likewise, the mental health of infants is directly tied to the mental health of primary caregivers.
- **The wider community context plays an important role.** Factors related to systemic poverty and structural racism can threaten infant mental health, while access to quality housing, education, food, transportation, and other community resources helps to strengthen infant mental health.

- **Promoting infant mental health involves both maximizing positive influences and minimizing negative ones.** An infant’s capacity for resilience is a function of the supports they enjoy, offset by the adversities they must endure.
- **Infancy is an unmatched period of intense learning and rapid skills development.** Core capacities that help maintain mental health—like managing emotions, fostering healthy relationships, and engaging meaningfully with the world—develop in tandem with cognitive abilities, and are significantly shaped during the first few years of life.
- **Every infant is unique and complex.** While all infants share certain universal attributes and needs, each one is complicated, multi-faceted, and a whole person in their own right. Understanding a particular infant, just like understanding a particular adult, requires curiosity, open-mindedness, and deep listening.

The Cultural Landscape We Need to Navigate

When audiences interpret campaign messages, they inevitably bring their own stories, associations, assumptions, and mindsets to bear. Across the culture of the United States (as in any culture), several of these mindsets are deeply held and widely shared.

The way humans make sense of and respond to new information is significantly shaped by the patterns in thinking we already hold. As campaign developers, we can help audiences engage more productively with our messages by first mapping the cultural landscape and identifying the most dominant mindsets in play. Unlike public opinions, attitudes, or beliefs, cultural mindsets are implicit models of reasoning: typically activated at a subconscious level, and by default.

Six key cultural mindsets related to infant mental health, which have been identified through FrameWorks' research, are described in Table 1 below. Beyond helping us anticipate how audiences are likely to interact with our communications, including how particular mindsets may even impede our intended takeaways, mapping the cultural landscape helps us adapt accordingly and informs our evidence-based framing strategy (laid out in the next section).

Table 1: Cultural Mindsets Related to Infant Mental Health

Dominant Mindset	Implications for Campaign Development	Alternative Mindset
Aging Up A tendency to think about older children (for example, school-aged children, or at least those who are old enough to walk and talk), as opposed to infants, for whom we have very few cultural reference points.	When this mindset is activated... our messages about infants may not easily compute with audiences, or could even cause confusion/pushback.	People can also appreciate that we need to build from the bottom up, which involves laying the Foundation First . We can activate this mindset to prompt thinking about the earliest years in life, and help our audiences see them as carrying particular importance.
Family Bubble A default assumption that children's outcomes, both good and bad, are a direct result of what happens in the home, and more specifically of the actions (or inactions) of primary caregivers.	When this mindset is activated... the particular decisions and behaviors of individual caregivers, most of all parents, are heavily scrutinized. Where our messages reference challenges or a lack of support, parents/caregivers themselves are likely to be blamed.	People can also recognize that factors beyond household-level decision-making hold implications for family wellbeing. We can expand thinking about the many ways our communities and surroundings shape our lives by activating the mindset that Context Matters .
Naturalism An implicit understanding of how 'natural' or 'normal' early childhood development happens, which involves babies instinctually following an established trajectory of growing bigger and becoming more recognizably person-like over time.	When this mindset is activated... essential developmental supports and interventions of all kinds become invisible. Messages that call for policies, programs, and services to meet developmental needs may feel inappropriate, or be interpreted by audiences as an indication of situation-specific deficiencies.	People can also tap into a deeply held sense of Shared Responsibility for children, and a desire to do whatever is required to ensure children are taken care of and adequately provided for. By activating this alternative mindset, we can help people see early childhood development as an engaged and active process that requires supportive involvement in many forms.

Dominant Mindset	Implications for Campaign Development	Alternative Mindset
Consumerism A way of thinking about valued resources—including human knowledge, skillsets, and activities—as tradeable commodities that can be represented as line items on a balance sheet.	When this mindset is activated... messages about ensuring that infants can reach developmental milestones and realize their future capabilities are likely to be viewed through a cost-benefit analysis. Likewise, proposed initiatives related to infant mental health promotion, prevention, and treatment may be valued in accordance with their projected ROI (“return on investment”) potential.	People can also acknowledge the existence of a Common Good, in which our fundamental needs are universal and our core interests are aligned. Activating this alternative mindset can help people see infant mental health as a shared human endeavor rather than a calculable asset: one that requires cooperation rather than competition.
Us / Them A lens on the world that brings group identities, and especially group differences, into focus first.	When this mindset is activated... audiences are highly attentive to social indicators such as gender, class, and especially race. Similar to the Family Bubble mindset, Us/Them thinking easily leads to misplaced blame. In the worst cases, it also fuels harmful stereotypes and rationalizes disparate treatment based on group affiliation.	People can also recognize that the essential components of the human condition—including the importance of close relationships, as well as physical and mental wellbeing—cut across all socially constructed lines of difference. We can activate the Interconnection mindset to cue up this more holistic and mutualistic way of thinking.
Fatalism A habitual way of disengaging from expansive or complex social issues, often rooted in a superficial understanding about the causes of problems, combined with a deep skepticism about our capacity to solve them.	When this mindset is activated... the tasks of building public understanding of infant mental health, and encouraging sustained public engagement with the issue, become much more difficult—but also even more needed and important.	People can also tap into a sense of collective purpose and pride in our capacity as problem-solvers. Appealing to the principle of Ingenuity can inspire audiences to meaningfully engage with the issue of infant mental health, and seek effective solutions to current challenges.

An Evidence-Based Framing Strategy: 5 Principles

Once we've mapped the landscape of public thinking and identified cultural mindsets to activate or avoid, we need tools for successful navigation.

Understanding where current public thinking could intercept campaign messages, and other places where it may facilitate effective communication, is the first step in strategic framing. Step two involves developing and testing a variety of frames to see which help us steer clear of those potential hazards and capitalize on opportunities. The framing principles shared below are drawn from prescriptive framing research that did just that. Together, these five principles make up an evidence-based framing strategy.

FRAMING PRINCIPLE #1

Lead with a vision.

Many campaign communications lead with the problem: a troubling statistic, inconvenient truth, or looming crisis to be solved. Unfortunately, problem-based messaging often does more harm than good with public audiences, prompting an immediate and spiked emotional response, followed by disengagement and a sharp retreat. A more effective strategy involves leading with a positive, aspirational vision—one that outlines the kind of society we're working towards and the future world we aim to build.

Below are some tips for implementing this principle, with examples to illustrate:

Emphasizing problems can reinforce negative associations and feed a sense of fatalism. Rather than depict people as struggling or suffering, **portray people rallying together** to create meaningful and needed change.

Instead of this:

Too many of Philadelphia's babies have insufficient access to books, storytelling, and the alphabet.

Try this:

Let's spark a reading revolution together! Join Philly families who believe in the #Right2Read.

Instead of this:

It's time to remove the stigma attached to families involved in the child welfare system.

Try this:

All families want to be able to provide their children with the best possible care.

It might be tempting to refute misinformation, reject stereotypes, or rebut myths, but a more effective strategy is to **make the affirmative case**. Focus on what is true, what is important, and what's missing from (or overshadowed by) the current conversation.

Adopt a "gain frame" that highlights the benefits of acting swiftly, appropriately, and together (as opposed to a "loss frame" that warns against the consequences of acting too little or too late).

Instead of this:

If we fail to act, we will see the situation further deteriorate and outcomes plummet [...]

Try this:

If we work together, we can shift practices, change policies, and improve outcomes [...]

Instead of this:

It is essential that we promote mental health and wellness for the most vulnerable young children in Connecticut.

Try this:

It is essential that we promote mental health and wellness for infants in order to support families across Connecticut and build a thriving society.

Appealing to infants' vulnerability tends to prompt superficial, short-term interest at best—and can even backfire. Instead, **appeal to a shared value**, like Social Prosperity, to convey universal importance and deepen engagement over the long term.

FRAMING PRINCIPLE #2

Show instead of tell.

In today's world, we are saturated with information—a million messages flying at us from all directions at all times. Not everything sticks, but the messages that do tend to be the ones that paint a picture rather than state a fact. These communications help us 'see' services being delivered, relationships being strengthened, families engaging with social systems, and policies in action, rather than merely informing us about these phenomena in the abstract. Likewise, the most compelling and effective campaign communications show instead of tell audiences who's who and what's what.

Below are some tips for implementing this principle, with examples to illustrate:

To help people better understand important issues, recognize common experiences, and appreciate our shared social context, **provide a real world example that illustrates the broader pattern**. (By contrast, stories of exceptional people or events carry less societal relevance, and can even distort our understanding of structural opportunities and challenges.)

Instead of this:

Home visiting programs, like the Nurse-Family Partnership, provide critically needed support for parents with newborns [...]

Try this:

The first time I visited the Johnsons at their home, baby Kia was only a week old and her parents had about a million questions [...]

Instead of this:

Social-emotional health is essential to infant and early child development.

Try this:

It might look different for infants than it does for adults, but the same is true for all of us: we get better at interacting with other people and expressing our feelings the more practice we get.

Avoid highly technical terms and field-specific jargon, especially when communicating with non-expert audiences. Instead, **offer plain language description** to invite audiences into the conversation and establish shared understandings of essential concepts.

Consider Plain Language Alternatives to These Technical Terms



Try this:

Just like roots are fundamental to the healthy growth of young plants, nurturing relationships are essential to the positive development of infants. As a community, we can help infants blossom and thrive by strengthening supports for families and tending to the root systems that promote wellbeing.

Another more effective alternative to jargon is to **use the power of metaphor to translate complex ideas**. The Roots metaphor, for example, can be used to help explain the concept of attachment and the essential role of dyadic relationships in ensuring healthy early development, while also fostering greater awareness of the wider environmental context.

Metaphor is an Effective Translation Device

The **Roots** metaphor (modelled in the example above) helps convey that relationships, just like roots:

- are formed at the very beginning
- remain fundamental to healthy growth and development
- must be strong, stable, and nurturing
- can deepen over time
- require a supportive environment
- experience disturbance and repair

Beyond the *Roots* metaphor, many other metaphors have been tested and proven effective for translating key concepts related to infant mental health, such as:

- **(Brain) Architecture**: a metaphor for the active and sequential process that brain development entails.
- **Serve & Return**: a metaphor for the responsive interactions between young children and adults that are critical to early learning and growth.
- **Weaving Skills Rope**: a metaphor for the way cognitive, social, and emotional skills all strengthen and reinforce one another.
- **Air Traffic Control**: a metaphor for how executive functioning works, and the various capacities it involves.
- **Resilience Scale**: a metaphor for the community-level factors that either weigh families down or lighten their loads, and therefore strain or build resilience.
- **Toxic Stress**: a metaphor for the kinds of adverse childhood experiences that can disrupt healthy development.
- **Overloaded**: a metaphor for the way structural barriers and social stressors impede the caregiving capacity of families.

FRAMING PRINCIPLE #3

Put people in context.

People are at the heart of all efforts to promote infant mental health, and they belong at the heart of our communications about infant mental health too. However, telling people-centered stories doesn't mean telling stories that omit places, events, conditions, policies, or environments. In fact, telling an authentic and complete story about the lives of people involves shedding light on the external influences that shape their experiences, the structural factors that affect their outcomes, the social processes and dynamics to which they contribute, and the various contexts in which they live, work, play, socialize, grow, and learn.

Below are some tips for implementing this principle, with examples to illustrate:

Instead of this:	Try this:	Give every story a setting
Parents don't always know how to recognize their infants' speech delays as a serious concern. Even after noticing problems, many wait too long before seeking help from a speech-language pathologist, missing an important window for early intervention that could improve long-term outcomes.	Recognizing speech delays in infants requires professional skill. Even if parents notice problems, barriers like limited access to speech-language pathologists in low-income and rural areas, long waitlists, and little paid leave to attend appointments, prevent many infants from getting the early interventions they need.	to alleviate scrutiny and unfair blame on individual parents and caregivers. Whenever possible, name the external pressures and constraints, as well as incentives and motivations, around personal decision-making.

Highlight lived expertise, including the lessons learned and deep insights gained through firsthand experiences, as a community asset that can inform policymaking and improve social systems.

Something like this:

Like other separated families, Cam and Lisa understand firsthand its harmful effects on infant development. They also know that preventive measures, like the behavioral health services Cam has accessed and the job training program Lisa enrolled in, reduce trauma and improve outcomes. As we reform policies, their lived expertise must guide the way.

Instead of this:

More than 1 in 3 immigrants in the United States are subjects of a child protection investigation.

Try this:

Our child welfare system subjects more than 1 in 3 immigrants in the US to a child protection investigation.

Mention institutional practices and system-level procedures as a way to **indicate who is responsible** beyond just who is affected. This tactic also reinforces the fact that policies (not people) need fixing.

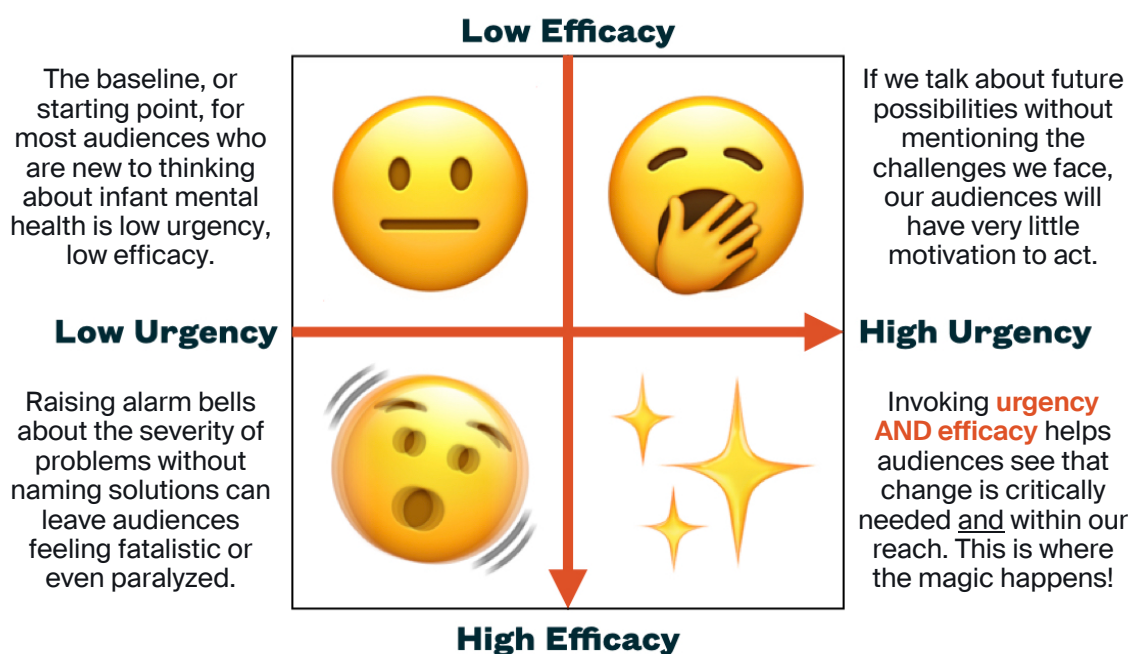
Tell a story from a particular point of view, which can be enlightening as well as compelling and memorable. Consider adopting the firsthand perspective of an IMH professional or parent/caregiver, or even the voice of an infant. Whichever you choose, make sure to capture that particular person's surrounding context and portray a 360-degree view.

Something like this:

I may only be a year old but I feel BIG emotions. Since I don't have the right words yet, I express my feelings the only ways I know how, like babbling and smiling or kicking and crying. Last night, I wasn't trying to give Papa a hard time, I was just having a hard time myself. I had been saving that raisin for my last bite but it rolled under the couch. Then I couldn't fall asleep because of the flashing lights outside my window, and the sound of a vacuum downstairs made me think aliens were coming to abduct my family! With Papa's patience and support, I'll keep practicing and get better at managing my emotions over time.

FRAMING PRINCIPLE #4**Explain key challenges.**

While we shouldn't lead off with problems (see Framing Principle #1 above), we certainly do need to talk about them. The trick is that we've got to do more than convince our audiences that significant challenges exist—we need to build public understanding about the root causes of those challenges so we can see how to intervene and prompt better outcomes. In short, we need to balance urgency with efficacy (as depicted in the diagram below).



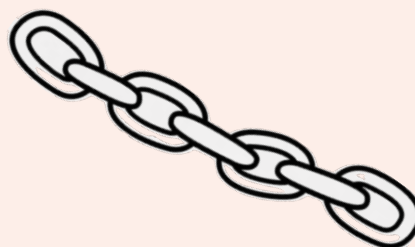
An effective and proven method for balancing urgency with efficacy, is to avoid simply naming key challenges, and instead take care to adequately explain them.

Below are some tips for implementing this principle, with examples to illustrate:

Instead of this:	Try this:	
Many children in under-resourced communities are starting kindergarten already behind their peers, struggling to sit still, follow instructions, or engage with basic learning activities.	When neighborhoods lack access to quality childcare, children miss critical windows for brain development—shaping how ready they are to learn when they walk through the kindergarten door.	Rather than just describe the symptoms of a problem, for example particular hardships or negative outcomes that families experience, offer a diagnosis—and connect the dots between causes and consequences .

Use “linking” phrases to demonstrate the process at play

- “This is the result of...”
- “Which leads to...”
- “Is affected by...”
- “And in turn...”
- “The reason it occurred was...”
- “Because of...”
- “As a result...”
- “That helps explain why...”



Then go a step further to describe how the current process could be disrupted or changed in order to prompt better outcomes, and **highlight potential points of intervention**.

Something like this:

... By expanding subsidized childcare and investing in neighborhood-based early learning programs, we can ensure that every child gets the stimulation and support their developing brain needs, right from the start.

RECOMMENDATION #5

Offer well-matched solutions.

Last but not least, every campaign must offer up solutions. To advance positive social and cultural change, however, not just any solutions will do. We need to raise awareness and build understanding about solutions that are both timely and durable, ambitious and feasible, collective and concrete. Most of all, we need to lift up solutions that are commensurate with the cause.

A common trap for campaign builders is to frame the problems we face as massive in size and scope, while framing solutions in highly individualized or simplistic terms. While this tactic likely stems from an understandable desire to make solutions feel attainable, it more often leads to disillusionment and distrust. [It is counterproductive, for example, to assert that “climate change threatens planetary and human health!” and then urge homeowners to change out their fluorescent lightbulbs.] To bring credible and appropriate solutions into view, it’s important to match the solution to the problem at hand. This can involve either zooming out to the big-picture, or zeroing in on a particular aspect of the situation. Either way, the treatment for both problem and solution should be the same.

Below are some tips for implementing this principle, with examples to illustrate:

Big problem:	~	Big solution:	One effective strategy involves matching a system-wide diagnosis of a social ill with a system-wide remedy. In other words: big problem, big solution .
Our mental healthcare system isn’t working for families with infants and young children—or for the service providers who deliver essential care.		Mental healthcare—from day one of life—is a public good. Investment is needed to increase access for families and improve training for providers.	

Another effective strategy involves zeroing in on a particular aspect of the problem, and offering up a targeted fix. In other words: **specific problem, specific solution**. Just remember that getting specific is NOT the same as going individual. Make sure to name systemic improvements that we can all support and contribute to, rather than personal or household-level actions.

Specific problem:

~

Specific solution:

Many eligible professionals don't even realize that IECMH endorsement exists as an option, much less how to obtain it.

Let's publicize the IECMH endorsement registry as a way to honor professionals who have it and encourage others to seek it too.

Try this:

Strong mental health for infants and families helps communities thrive. In Westford township, a local effort is bringing that principle to life. Through its Well Before Words initiative, a broad coalition of people contribute to infant wellbeing—and in a variety of ways. Therapists work with children under the age of 3 to help them process life events and heal from trauma. Family coaches support households juggling multiple responsibilities. Nurses and other health professionals connect physical and mental health needs. Childcare providers identify concerns early on and link families to essential services. Parents share firsthand experiences of navigating social systems and highlight critical gaps, while neighborhood residents and local leaders push for policy changes. Through these valuable partnerships and collective efforts, Westford is building a stronger support system for infants and their families—and a stronger community for everyone.

Depict different people in different roles,

working together in coordination and collaboration to implement large-scale solutions, improve conditions, and create needed change. This helps us as individuals better understand the “systems” we belong to (which can feel abstract at times)—and makes it possible to imagine how we can each contribute, in our own ways, to their redesign.

Conclusion

Promoting infant mental health across Connecticut—now and into the future—is both an urgent and an achievable goal.

The five framing principles outlined in this brief—leading with a vision, showing instead of telling, putting people in context, explaining key challenges, and offering well-matched solutions—provide campaign developers with proven tools to navigate a complex cultural landscape and move public thinking as well as decision-making in a more productive direction. Applied consistently across messages, platforms, and audiences, these principles can help expand awareness, build understanding, and galvanize action towards better mental health outcomes for all infants across Connecticut, including through increased supports for the IECMH workforce, caregivers, and all families.

Relevant Resources

- 1 FrameWorks Institute. (2025). *Changing the Public Conversation on Family Health, Stability, and Permanency*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/changing-the-public-conversation-on-family-health-stability-and-permanency/>
- 2 FrameWorks Institute. (2024). *Collective Caregiving: A Frame for Talking About What Kids and Families Need to Thrive*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/collective-caregiving-a-frame-for-talking-about-what-kids-and-families-need-to-thrive/>
- 3 FrameWorks Institute. (2024). *Putting the Collective Caregiving Frame into Action: A Guide for Child and Family Advocates*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/putting-the-collective-caregiving-frame-into-action-a-guide-for-child-and-family-advocates/>
- 4 National Scientific Council on the Developing Child. (2023). *Place Matters: The Environment We Create Shapes the Foundations of Healthy Development: Working Paper No. 16*. <https://www.frameworksinstitute.org/impact-stories/framing-child-wellbeing/>
- 5 FrameWorks Institute. (2021). *Reframing childhood adversity*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/reframing-childhood-adversity-promoting-upstream-approaches/>
- 6 FrameWorks Institute. (2021). *Reframing Children's Mental Health: A Toolkit*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/reframing-childrens-mental-health/#Anticipating%20Message%20Reception>
- 7 FrameWorks Institute. (2020). *Building relationships: Framing early relational health*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/building-relationships-framing-early-relational-health/>
- 8 FrameWorks Institute. (2019). *Making Room for More: Building Support for Young Dual Language Learners in the US*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/making-room-for-more-building-support-for-young-dual-language-learners-in-the-us/>
- 9 FrameWorks Institute. (2018). *Reframing Developmental Relationships*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/reframing-developmental-relationships-a-frameworks-messagememo/>
- 10 FrameWorks Institute. (2015). *Framing Fundamentals for Multigenerational Approaches to Mental Health: A Toolkit*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/framing-fundamentals-for-multigenerational-approaches-to-mental-health/#Tools%20and%20Resources>
- 11 FrameWorks Institute. (2014). *Talking about Child Mental Health in Tennessee*. Washington, DC: FrameWorks Institute. <https://www.frameworksinstitute.org/resources/talking-about-child-mental-health-in-tennessee/#The%20Big%20Picture>

About FrameWorks

The FrameWorks Institute is a non-profit think tank that advances the mission-driven sector's capacity to frame the public discourse about social and scientific issues. The organization's signature approach, Strategic Frame Analysis®, offers empirical guidance on what to say, how to say it, and what to leave unsaid. FrameWorks designs, conducts, and publishes multi-method, multi-disciplinary framing research to prepare experts and advocates to expand their constituencies, to build public will, and to further public understanding. To make sure this research drives social change, FrameWorks supports partners in reframing, through strategic consultation, campaign design, FrameChecks®, toolkits, online courses, and in-depth learning engagements known as FrameLabs. In 2015, FrameWorks was named one of nine organizations worldwide to receive the MacArthur Award for Creative and Effective Institutions.

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